

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		04-10-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H	913	05-31-01
RESPONSE FORMALITY REVIEW		1001	8-28-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9-20-01
2	1-20-02
3	1-20-02
4	1-20-02
5	1-20-02
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50	1-20-02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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